I hereby certify that the information indicated on this report or supplemental report is true oath; that I am an officer or director of the corporation or the receiver or trustee empower above, or on an attachment with all other like empowered.		
SIGNATURE [,] CARIDAD SAAD	TD	02/01/2016

TD

SIGNATURE: CARIDAD SAAD

Electronic Signature of Signing Officer/Director Detail

City-State-Zip: MIAMI FL 33015

SIGNATURE:

	Electronic Signature of Registered Agent			
Officer/Director Detail :				
Fitle	PD	Title	TD	
Name	SAAD, JOSE	Name	SAAD, CARIDAD	
Address	20120 W OAKMONT CIRCLE	Address	20120 W OAKMONT CIRCLE	
City-State-Zip:	MIAMI FL 33015	City-State-Zip:	MIAMI FL 33015	
Fitle	SD			
Name	SAAD, ABRAHAM			
Address	20120 W OAKMONT CIRCLE			

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

MIAMI. FL 33015 US

Name and Address of Current Registered Agent:

SAAD, CARIDAD 20120 W OAKMONT CIRCLE MIAMI, FL 33015 US

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19962

Entity Name: 24TH AVENUE HOMEOWNERS ASSOCIATION INC.

Current Principal Place of Business:

20120 W OAKMONT CIRCLE MIAMI, FL 33015

Current Mailing Address:

20120 W OAKMONT CIRCLE

FEI Number: 65-0128302

Certificate of Status Desired: No

Date

Date

FILED Feb 01, 2016 Secretary of State CC9502469813